

PATENT***IN THE UNITED STATES PATENT AND TRADEMARK OFFICE***

In re application of: Snow et al.

Attorney Docket No.: IGT1P073

Application No.: 09/338,286

Examiner: John M Hotaling II

Filed: June 22, 1999

Group: 3713

Title: Processing Platform for a Gaming Machine

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being transmitted via facsimile to the U.S. Patent and Trademark Office, Attention: Examiner Hotaling at facsimile telephone number (703) 872-9306 on September 9, 2004.

Signed: *Tornika Thomas*

Tornika Thomas

AMENDMENT C

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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SEP 09 2004

Dear Sir:

In response to the Office Action dated June 6, 2004 and the in-person interview of July 23, 2004 please amend the above-identified patent application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.

IGT1P073/P-229/JKW/DPO

1

In response to Office Action dated June 6, 2004

BEYER WEAVER & THOMAS, LLP

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FACSIMILE COVER SHEET

September 9, 2004

Receiver: John M. Hotaling II
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FAX # : 703-872-9306

Sender: Tomika D. Thomas, Patent Secretary to:
DAVID P. OLYNICK

Our Ref. No.: IGT1P073
Application No.: 09/338,286

Re: Amendment C

Pages Including Cover Sheet(s): 9

MESSAGE:

If any fees are due in connection with this filing, the Commissioner is hereby authorized to charge such fees to Deposit Account 500388 (Order No. IGT1P073)

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SEP. 9. 2004 6:04PM

BWT LLP (BERKELEY)

SEP 09 2004

NO. 862 P. 2

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Signed:

Tomika Thomas

AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:


Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	09	MINUS	20	00	x 9 =	x 18 = 00
Independent Claims	01	MINUS	03	00	x 43 =	x 86 = 00
Multiple Dependent Claim Present and Fee Not Previously Paid					\$145.00	\$290.00
Total					\$	\$00

- ☐ Applicant(s) hereby petition for a _____ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. IGT1P073).

Respectfully submitted,
BEYER WEAVER & THOMAS, LLP


David P. Glynnick
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